File with: lowa Ethics and Campaign

Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization) Allen for Sheriff IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTEES ONLY: Candidate Name Clayton Allen Office Sought Madison Co Sheriff District (if Senate or House)

RECEIVED
JUL 2 1 2008

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use On	ly
Comm. #	
Logged In	
Scanned	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED
I AM FILING A July 19, 2008	REPORT FOR (1) ELECTION	ON /(2)NON-E	LECTION YEAR
(report date)	Indicate I	·	
CHECK IF AMENDMENT TO REPORT DATED		Local Comm	nittees, enter Date of Election
☐ Check if this is final (termination) report and attach Notice of I (You must continue to file reports until a DR-3 is filed.)		11/4/2008	cal Committees, enter County in
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the call of the last reporting period or must be zero if this is first	sh on hand at the end	\$	0.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)		700.00
Schedule F: Loans Received total (Attach Schedule F)	·		5,500.00
Schedule H: Total Sales of Campaign Property (Attach	Schedule H)		
(Schedule H applies to Candidates' Commi			6,200.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TUTAL.	······•	
Schedule B: Expenditures total (Attach Schedule B) (**	'also see debts and loans below	41)	5,604.10
Schedule F: Loan Repayments total (Attach Schedule		•	
CASH ON HAND at the end of this reporting period (if final report			595.90
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedul	le E)	\$	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	F)	\$	5,500.00
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES ✓ NO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach	Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign account	bank statement in January of e	ach year.	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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2008 JUL 21 PM 12: 54

Reset Form

SCHEDULE A (Rev. 07/03)

MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B 32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISER
6-10	ID# CK#	Botto Niblo	•	\$ 100 °C	INCOM
2-19	CK#	Botty Niblo	shel mother	500	
79	ID# CK#	Shirely shory		10000	
	ID# CK#				
	CK#				
	ID# CK#				
			SUB-TOTAL	\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "rol applicable" in the relationship column.

Page ______ of _____

TOTAL (if last page of this schedule)

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

ID# A = 400	DATE XPENDED MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	EXF	DDRESS TO WHOM PENDITURE ment) WAS MADE	(DESCRI	PURPOSE BE TRANSACTION	ON)	AMOU EXPEN	INT DED
ID# CK# ID# ID# CK# ID# ID#	21408	CK#	<	Art A	34N5, 1	sebsite,		\$554	77
ID#		CK#	mark Str	et Clerks	BANK	checks		66	
ID#									
ID#									
CK# CK#									
ID#									
		(D#	A manufacture of the state of t						-
		ID#							

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

(for Schedule B)

	The second second		the committee of the co	2009 JUL 21 which is deposited in the s		CHECK THIS BO
(Origina	al source of loan	, such as a b	D ADDRESS OF	own if a third party is inv	olved. Include loans from cand	AMOUNT OF LOAN
RECEIVED (MM/DD/YR)			chan	Earllar F JA	CANDIDATE (If Applicable	* 5500°
						\$5500 °°-
		DEDAVMENT	'S MADE <u>This</u> f	REPORTING PERIOD	TOTAL (PART I)	\$ 2200 -
RTH - MON (Loan	ETARY LOAN I s forgiven must	be reported o	n Schedule E	In-kind Contributions.)		
RT II - MON (Loan DATE PAID (MM/DD/YR)	s forgiven must	be reported of NAME AN	n Schedule E D ADDRESS OF lorser's Name, I	LENDER	RELATIONSHIP TO CANDIDATE* (If Applicable	
(Loan	s forgiven must	be reported of NAME AN	D ADDRESS OF	LENDER		
(Loan	s forgiven must	be reported of NAME AN	D ADDRESS OF	LENDER		e)
(Loan	s forgiven must	be reported of NAME AN	D ADDRESS OF	LENDER		e)
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